

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Blue Cross Blue Shield of South Carolina Federal Government Programs

ADDRESS (number and street)

Interstate 20 at Alpine Road

☐Check if different
than previously
reported. (ACC)

Columbia

SC

29214

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00406850

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☒

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 1

2 3

2 0 1 0

through

1 2

3 1

2 0 1 0

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Nancy Cushman

Signature of Treasurer

Electronically Filed by Nancy Cushman

Date

0 1

1 1

2 0 1 1

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 45

Write or Type Committee Name

Blue Cross Blue Shield of South Carolina Federal Government Programs

Report Covering the Period:

From:

M M
1 1D D
2 3Y Y Y Y
2 0 1 0

To:

M M
1 2D D
3 1Y Y Y Y
2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2010		85072.49
(b) Cash on Hand at Beginning of Reporting Period	78580.05	
(c) Total Receipts (from Line 19)	6869.08	74376.64
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	85449.13	159449.13
7. Total Disbursements (from Line 31)	-2000.00	72000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	87449.13	87449.13
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Blue Cross Blue Shield of South Carolina Federal Government Programs

Report Covering the Period:

From:

M	M
1	1

D	D
2	3

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	4538.16	28186.12
(ii) Unitemized	2330.92	46190.52
(iii) TOTAL (add Lines 11(a)(i) and (ii)	6869.08	74376.64
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	6869.08	74376.64
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	6869.08	74376.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6869.08	74376.64

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	25000.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	-2000.00	47000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	-2000.00	72000.00	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	-2000.00	72000.00	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	6869.08	74376.64
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6869.08	74376.64
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

ROBERT W JOHNSON

Mailing Address P O BOX 280

City

WINDSOR

State

SC

Zip Code

29856-0280

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 1 0

Transaction ID: 9709813

Amount of Each Receipt this Period

60.00

B.

Full Name (Last, First, Middle Initial)

JENNIFER L RUST

Mailing Address 25 HERITAGE VILLAGE LN

City

COLUMBIA

State

SC

Zip Code

29212-3516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR ANL, IT SUPT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60891324576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

BRYANNE L CURRY

Mailing Address 210 RAVENEL ST

City

COLUMBIA

State

SC

Zip Code

29205-2749

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60892974576

Amount of Each Receipt this Period

26.00

P/R Deduction (\$13.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

106.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

DANA E CHEEK

Mailing Address 707 PEMBROKE AVE

City

COLUMBIA

State

SC

Zip Code

29205-3935

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

ANL, IT SUPT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60893024576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ANNA R WARREN

Mailing Address 328 DENBY CIRCLE

City

COLUMBIA

State

SC

Zip Code

29229-7780

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

ANL, IT SUPT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60893074576

Amount of Each Receipt this Period

26.00

P/R Deduction (\$13.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

BLAINE R KEENER

Mailing Address 220 DAYLILY RD

City

REMBERT

State

SC

Zip Code

29128-9563

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60893244576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

66.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

SCOTT A MCCARTHA

Mailing Address 217 PINNACLE DR

City

COLUMBIA

State

SC

Zip Code

29212-0610

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

MGR, PROV CONT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60893434576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

BARBARA B WINDHAM

Mailing Address 110 STEEPLECHASE RD

City

LEXINGTON

State

SC

Zip Code

29072-9768

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

CFO, PAI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60893904576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

LAURA J HESTER

Mailing Address 109 HORSE GUARDS LANE

City

COLUMBIA

State

SC

Zip Code

29229-8836

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SUPV, MARKETING

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60894114576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

JAYLENE P BRAXTON

Mailing Address 203 EAST HAMPTON WAY

City

COLUMBIA

State

SC

Zip Code

29229-8775

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SPEC, SERVICE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60894534576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ANGELA D ROWE

Mailing Address 8 HABERSHAM WAY

City

BLYTHEWOOD

State

SC

Zip Code

29016-8295

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

AVP, SR DEP GEN CNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60894984576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

VICKI L WHICHARD

Mailing Address 430 JOSHUA STREET

City

COLUMBIA

State

SC

Zip Code

29205-3078

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, CDHP/SPEC PROD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60895074576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

JAMES M HOLLOWAY III

Mailing Address 1310 SHIRLEY ST

City

COLUMBIA

State

SC

Zip Code

29205-1440

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

REP, SALES II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60895324576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

KAY L ANDREWS

Mailing Address 514 PRESTWICK DRIVE

City

FLORENCE

State

SC

Zip Code

29501-8735

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60896104576

Amount of Each Receipt this Period

90.00

P/R Deduction (\$45.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

JORDAN D EVANS

Mailing Address 2618 HARLESTON GREEN DR

City

FLORENCE

State

SC

Zip Code

29505-7019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

AST VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60896114576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

170.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

TABATHA D CRIBB

Mailing Address 221 NORTH CENTER ROAD

City

HARTSVILLE

State

SC

Zip Code

29550-7321

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

ADMIN, WRKFLOW SYST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60896374576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

BRETT J LOOKER

Mailing Address 330 OAK DRIVE

City

LEXINGTON

State

SC

Zip Code

29073-9041

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, PHARMACY SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60898874576

Amount of Each Receipt this Period

44.00

P/R Deduction (\$22.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

RUSSELL W VEREEN

Mailing Address 508 EAST SPRINGS ROAD

City

COLUMBIA

State

SC

Zip Code

29223-7026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60901194576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

84.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 45

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

STEVEN B SMITH

Mailing Address 2 RICHMOND LANE

City

BLYTHEWOOD

State

SC

Zip Code

29016-9088

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, CUSTSVC & CLMS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: PR60901384576

Amount of Each Receipt this Period

14.00

P/R Deduction (\$7.00 Bi-W-
eekly)**B.**

Full Name (Last, First, Middle Initial)

BRIAN J DAVIS

Mailing Address 503 AIKEN HUNT CIRCLE

City

COLUMBIA

State

SC

Zip Code

29223-8421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR ANL, IT SUPT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: PR60902404576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-
Weekly)**C.**

Full Name (Last, First, Middle Initial)

HOMER J TERRAPIN JR

Mailing Address 121 DRIFTWOOD DR

City

LEXINGTON

State

SC

Zip Code

29072-9729

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: PR60902414576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

54.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

ROBERT J GIMMI

Mailing Address 534 SOUTH BOUNDARY RD

City

CAMDEN

State

SC

Zip Code

29020-3060

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR ANL,AP DEV SY II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60902874576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

PAUL R POVEY

Mailing Address 232 MUIRFIELD CT E

City

BLYTHEWOOD

State

SC

Zip Code

29016-9577

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

MGR, MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60903834576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

ARCH G MARTIN

Mailing Address 6 RICHMOND LN

City

BLYTHEWOOD

State

SC

Zip Code

29016-9088

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60904004576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

DANIEL R CLAAS

Mailing Address 126 WELSH COURT

City

LEXINGTON

State

SC

Zip Code

29073-8878

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

AVP, UNDRWRTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60904134576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

LAURENCE H SHOREY

Mailing Address 4311 CROWS NEST CT

City

MYRTLE BEACH

State

SC

Zip Code

29579-6906

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

MGR, OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60905114576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

JAMES C WRIGHT III

Mailing Address 2218 CLARK STREET

City

COLUMBIA

State

SC

Zip Code

29201-1838

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60908484576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

HEATHER S HEMBY

Mailing Address 3410 W OLD CAMDEN RD

City

HARTSVILLE

State

SC

Zip Code

29550-9579

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

MGR, OPERATIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60909874576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

KIRK E SMITH

Mailing Address 9728 HIGHGATE RD

City

COLUMBIA

State

SC

Zip Code

29223-2152

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

MGR, QA MAIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60911294576

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

JOHN M LITTLE

Mailing Address P O BOX 248

City

FORT MILL

State

SC

Zip Code

29716-0248

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60914304576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

DUNCAN S MCINTOSH

Mailing Address 2859 GERVAIS ST

City

COLUMBIA

State

SC

Zip Code

29204-2329

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VP & GENERAL COUNSEL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60914544576

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

JUDITH M DAVIS

Mailing Address 5123 LAKESHORE DRIVE

City

COLUMBIA

State

SC

Zip Code

29206-4904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

EXEC VP, CHF LEG OFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60914834576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

JOSEPH B SOBEL

Mailing Address 312 TRENTWOOD DR

City

COLUMBIA

State

SC

Zip Code

29223-8417

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

OFFICER, CHIEF MED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60917474576

Amount of Each Receipt this Period

36.00

P/R Deduction (\$18.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

146.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

KERRY R BROWN JR

Mailing Address 2601 PARKWOOD DR

City

COLUMBIA

State

SC

Zip Code

29204-2249

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

ANL, APP DEV SYS I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60917854576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ANN T BURNETT

Mailing Address 82 SECESSION STREET

City

MT PLEASANT

State

SC

Zip Code

29464-6606

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60919874576

Amount of Each Receipt this Period

42.00

P/R Deduction (\$21.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

HELEN B MURRAY

Mailing Address 392 STONERIDGE COURT

City

BLYTHEWOOD

State

SC

Zip Code

29016-7738

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

AST VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60919894576

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

182.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

DEE A YURKO

Mailing Address 212 RIDGE POINTE COURT

City

GASTON

State

SC

Zip Code

29053-8499

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, OPS OVRSGT QLTY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60920644576

Amount of Each Receipt this Period

26.00

P/R Deduction (\$13.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

DAVID R GWIN

Mailing Address 107 ASHLEY HALL ROAD

City

COLUMBIA

State

SC

Zip Code

29229-9179

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, REG SLS/ACT MG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60920704576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

WILSON GIDRON JR

Mailing Address P O BOX 23541

City

COLUMBIA

State

SC

Zip Code

29224-3541

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60920924576

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

106.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)
TIMOTHY L VAUGHN

Mailing Address 130 LOCHWEED DR

City State Zip Code
COLUMBIA SC 29212-8511

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
VP & CFO BCBSSC DIV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60920954576

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
JOYCE C GANDY

Mailing Address 2106 ELDERBERRY DRIVE

City State Zip Code
FLORENCE SC 29505-3800

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
DIR, MED AFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60921224576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
HEATHER L SRULEVICH

Mailing Address 708 FORMBY DRIVE

City State Zip Code
COLUMBIA SC 29223-6813

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
VP, TAX AND M & A

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60922164576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

GEORGE L CORBIN III

Mailing Address 6608 VANWOOD DRIVE

City

COLUMBIA

State

SC

Zip Code

29206-1059

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60922634576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

STEFANIE SALTER

Mailing Address 2065 DOBSON ROAD

City

BLYTHEWOOD

State

SC

Zip Code

29016-9245

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

ANL, IT SUPT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60923014576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

WILLIAM T FAULDS

Mailing Address 1727 CRESTWOOD DRIVE

City

COLUMBIA

State

SC

Zip Code

29205-3209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, PROJ & PLAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60923224576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

CHRISTOPHER R MARTIN

Mailing Address 203 LUPINE RD

City

COLUMBIA

State

SC

Zip Code

29229-6820

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

ANL, IT SUPT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60927144576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

PETER E RESCIGNO

Mailing Address 2117 RIDING RIDGE ROAD

City

COLUMBIA

State

SC

Zip Code

29223-6714

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, SR SALES & OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60928064576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

MICHAEL J WILLIAMSON

Mailing Address 301 AIKEN HUNT CIRCLE

City

COLUMBIA

State

SC

Zip Code

29223-8407

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60928634576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)
DANNY R GRUNSKY

Mailing Address 605 HOPE FERRY ROAD

City State Zip Code
LEXINGTON SC 29072-9605

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
VP, GENERAL SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60930314576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
ALLAN J BROWN

Mailing Address 107 ARBOR PLACE DR

City State Zip Code
COLUMBIA SC 29229-7532

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
DIR, STRATEGIC SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60930454576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
ELIZABETH M MANNING

Mailing Address 199 WATEREE AVE

City State Zip Code
COLUMBIA SC 29205-3040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
AVP, SR DEP GEN CNS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60930544576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 45

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

MICHAEL V MOZDZIERZ

Mailing Address 11 AUSTREE CT

City

COLUMBIA

State

SC

Zip Code

29229-7581

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR ANL,AP DEV SY II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: PR60930754576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

PATTIE P MEADE

Mailing Address 2685 UNDERWOOD ROAD

City

SUMTER

State

SC

Zip Code

29154-8598

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

ANL, IT SUPT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: PR60930804576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

TERRY A PEACE

Mailing Address 460 OLD FERRY ROAD

City

CHAPIN

State

SC

Zip Code

29036-9569

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: PR60931064576

Amount of Each Receipt this Period

250.00

P/R Deduction (\$125.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

290.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 45

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

JANET S SKIPPER

Mailing Address 328 DAYLILY DR

City

LEXINGTON

State

SC

Zip Code

29072-7555

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR LEADER, PROJECT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: PR60934374576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ROBERT M NEVILS

Mailing Address 461 BEAUMONT PARK CIRCLE

City

BLYTHEWOOD

State

SC

Zip Code

29016-8277

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, INFO ASSURANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: PR60937654576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

BARRON G SMITH

Mailing Address 124 MISTY OAKS PLACE

City

LEXINGTON

State

SC

Zip Code

29072-7406

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	0

Transaction ID: PR60937784576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 45

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

JOHN M HALL

Mailing Address 1110 WILLHAVEN DRIVE

City

CHARLOTTE

State

NC

Zip Code

28211-4062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.Occupation
DIR, MKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: PR60940434576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

JIMMY C PREAS

Mailing Address 5995 SCOTFORD CT

City

ROANOKE

State

VA

Zip Code

24018-3883

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.Occupation
AVP, FIELD MRKTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: PR60945734576

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

MARY P MAZZOLASPIVEY

Mailing Address 1399 KATHWOOD DRIVE

City

COLUMBIA

State

SC

Zip Code

29206-4561

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.Occupation
PRES/COO BCHP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	1	0

Transaction ID: PR60945874576

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

JAMES A DEYLING

Mailing Address 81 REDBAY ROAD

City

ELGIN

State

SC

Zip Code

29045-8684

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60946504576

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

MICHAEL E HARRIS

Mailing Address 208 HARWELL DR

City

COLUMBIA

State

SC

Zip Code

29223-8104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VP, SALES

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60946594576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

DAVID S PANKAU

Mailing Address 17 FOX CHASE ROAD

City

COLUMBIA

State

SC

Zip Code

29223-3005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

PRESIDENT/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60946744576

Amount of Each Receipt this Period

150.00

P/R Deduction (\$75.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

270.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

DAVID A COTE

Mailing Address 19 ELLERY COURT

City

COLUMBIA

State

SC

Zip Code

29223-3294

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

AVP, TREA OP/ASST TR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60946874576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

CHARLES B CAMPBELL

Mailing Address 105 VALKYRIE BLVD

City

COLUMBIA

State

SC

Zip Code

29229-3328

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60947434576

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

JOHN A TJAARDA

Mailing Address 19 NEWFIELD COURT

City

WEST COLUMBIA

State

SC

Zip Code

29169-2321

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

ACCOUNTANT, IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60947774576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)
STEPHANIE B HECKART

Mailing Address 11 EASTBOURNE COURT

City State Zip Code
COLUMBIA SC 29223-6711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
DIR, EX BEH HLTH SVS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60947954576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
LISSA L SHINE

Mailing Address 3049 MARTINDALE ROAD

City State Zip Code
COLUMBIA SC 29223-2018

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
DIR, MED MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60947984576

Amount of Each Receipt this Period

32.00

P/R Deduction (\$16.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
TERYL A SCHOLLES

Mailing Address 413 CRESCENT DRIVE

City State Zip Code
CONWAY SC 29526-3235

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
DIR, CLAIMS OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

456.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60948084576

Amount of Each Receipt this Period

38.00

P/R Deduction (\$19.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

BRENDA L CAVALIERI

Mailing Address 217 BRYARS COURT

City

LEXINGTON

State

SC

Zip Code

29072-3857

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

ANL, IT SUPT I

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.04

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60948264576

Amount of Each Receipt this Period

23.08

P/R Deduction (\$11.54 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

JENNIFER R SPARKES

Mailing Address 1410 N DOGWOOD DRIVE

City

SURFSIDE BEACH

State

SC

Zip Code

29575-4247

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

MGR, TRAINING & DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60949204576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

CANDY H WRIGHT

Mailing Address 1008 RICE PLANTERS LANE

City

FLORENCE

State

SC

Zip Code

29501-8687

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, CLAIMS OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60950684576

Amount of Each Receipt this Period

34.00

P/R Deduction (\$17.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

97.08

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

AIMEE M DEANE

Mailing Address 318 CATAWBA TRL

City

LEXINGTON

State

SC

Zip Code

29072-9570

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

MGR, MAIL PROD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60951864576

Amount of Each Receipt this Period

22.00

P/R Deduction (\$11.00 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

EDWARD L RATHBUN

Mailing Address 578 RAINBOW CIRCLE

City

WEST COLUMBIA

State

SC

Zip Code

29170-4446

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR ANL, IT SUPT II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60952274576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

JOHN D BOWEN

Mailing Address 104 REDBUD COURT

City

WEST COLUMBIA

State

SC

Zip Code

29170-2456

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

MGR, INTERNAL AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60952774576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

62.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)
STEPHEN T CARTER

Mailing Address 207 BRIDGECREEK DR

City State Zip Code
COLUMBIA SC 29229-8911

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
AVP, CPLIFE/ACT, COMPL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60953204576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)
KIMBERLY A TAYLOR

Mailing Address 9 BELMONT DRIVE

City State Zip Code
CAMDEN SC 29020-7631

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
ANL, DATA III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60956344576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)
ROBIN E COOPER

Mailing Address 142 KINGSHIP DRIVE

City State Zip Code
CHAPIN SC 29036-6110

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation
MGR, ACCTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60956354576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

THERESA A HANLEY

Mailing Address 18 FOREST DRIVE

City

ELGIN

State

SC

Zip Code

29045-9228

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, CLAIMS OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60958304576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Weekly)

B.

Full Name (Last, First, Middle Initial)

DAVID J HUNTINGTON

Mailing Address P O BOX 210

City

LITTLE MTN

State

SC

Zip Code

29075-0210

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

PRES/COO PAI

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60958374576

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Weekly)

C.

Full Name (Last, First, Middle Initial)

ROBERT W JOHNSON

Mailing Address P O BOX 280

City

WINDSOR

State

SC

Zip Code

29856-0280

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

840.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60958424576

Amount of Each Receipt this Period

60.00

P/R Deduction (\$60.00 Weekly)

SUBTOTAL of Receipts This Page (optional)

160.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

WILLIAM M GRIGGS

Mailing Address 37 OLD STILL ROAD

City

COLUMBIA

State

SC

Zip Code

29223-3012

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR VP, NAT ALLIANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60958444576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

WAYNE T ROBERTS

Mailing Address 109 EAST SPRINGS ROAD

City

COLUMBIA

State

SC

Zip Code

29223-7001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

780.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60958554576

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

STEPHEN K WIGGINS

Mailing Address 122 LAKE MURRAY COURT

City

LEXINGTON

State

SC

Zip Code

29072-9104

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

EXEC VICE PRES&CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60958934576

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

190.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

MICHAEL J SKARUPA

Mailing Address 2668 TROTTER ROAD

City

FLORENCE

State

SC

Zip Code

29501-1971

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

PRES/COO PGBA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60958944576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

VINCENT W BATTEN

Mailing Address 119 DUCHESS TRAIL

City

LEXINGTON

State

SC

Zip Code

29073-9700

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60958994576

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

RONALD L RUSHTON

Mailing Address 106 W BUTLER AVE

City

SALUDA

State

SC

Zip Code

29138-1306

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60959114576

Amount of Each Receipt this Period

100.00

P/R Deduction (\$50.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

JANET S BAILEY

Mailing Address 1919 HOLLY POINT ROAD

City

PROSPERITY

State

SC

Zip Code

29127-7648

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VP/CHIEF ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60959254576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

FERRELL WILLIAMS

Mailing Address 124 WOODSHORE DRIVE

City

COLUMBIA

State

SC

Zip Code

29223-5535

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

AVP, UNDRWRTG

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60959494576

Amount of Each Receipt this Period

22.00

P/R Deduction (\$11.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

EDGAR B WALTERS

Mailing Address 474 MEADOW BROOK DR

City

COLUMBIA

State

SC

Zip Code

29223-2923

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR DIR, PROV NET MGT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60959674576

Amount of Each Receipt this Period

32.00

P/R Deduction (\$16.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

94.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

WILLIAM F ROWELL

Mailing Address 418 BAY POINTE

City

LEXINGTON

State

SC

Zip Code

29072-7183

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60959724576

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

DALE L RISH

Mailing Address 164 ROSE LAKE RD

City

LEXINGTON

State

SC

Zip Code

29072-7665

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60959764576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

ELIZABETH C NETTLES

Mailing Address 505 LAURENS COURT

City

CAMDEN

State

SC

Zip Code

29020-3608

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

ANL,OP CST CONT III

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60959784576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

PAMELA J GALVIN

Mailing Address 505 MEADOW BROOK DR

City

COLUMBIA

State

SC

Zip Code

29223-2910

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, MAIL OPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60959974576

Amount of Each Receipt this Period

25.00

P/R Deduction (\$12.50 Bi-
Weekly)

B.

Full Name (Last, First, Middle Initial)

KAREN H NIXON

Mailing Address 105 INDIGO CHASE

City

COLUMBIA

State

SC

Zip Code

29229-8961

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

AVP, MG OPS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.04

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60960284576

Amount of Each Receipt this Period

43.08

P/R Deduction (\$21.54 Bi-
Weekly)

C.

Full Name (Last, First, Middle Initial)

MARK MACDOUGAL

Mailing Address 287 WATEREE RIVER RD

City

MYRTLE BEACH

State

SC

Zip Code

29588-7471

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60960334576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-
Weekly)

SUBTOTAL of Receipts This Page (optional)

118.08

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

STEVE VONFANGE

Mailing Address 217 SPRINGWATER DR

City

COLUMBIA

State

SC

Zip Code

29223-5561

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60960394576

Amount of Each Receipt this Period

80.00

P/R Deduction (\$40.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

MICHAEL GURRERA

Mailing Address 9 CHINA ROSE COURT

City

COLUMBIA

State

SC

Zip Code

29229-8815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VP & CFO PGBA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60960404576

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

RENEE S MCCORMICK

Mailing Address 3 BRIARBERRY ROAD

City

COLUMBIA

State

SC

Zip Code

29223-6712

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

IT MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60961164576

Amount of Each Receipt this Period

24.00

P/R Deduction (\$12.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

134.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

JOHN S MASEK

Mailing Address 16 EASTBOURNE CT

City

COLUMBIA

State

SC

Zip Code

29223-6711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR ACTUARY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60961934576

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

ANGELA S BAUGHMAN

Mailing Address 2460 FORT MILL RD

City

ELGIN

State

SC

Zip Code

29045-9045

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SR DIR,PH CONT/SALE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60962294576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

BARBARA A KELLY

Mailing Address 11 STOCKTON COURT

City

BLYTHEWOOD

State

SC

Zip Code

29016-8891

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

VP, HR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60962804576

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

DAWN L MCMILLENKELLY

Mailing Address 2712 CUNNINGHAM CT

City

DARLINGTON

State

SC

Zip Code

29532-7449

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

SPEC, TRAINING II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60962854576

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

KATHY M MCDONALD

Mailing Address PO BOX 82

City

LAMAR

State

SC

Zip Code

29069-0082

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

MGR, CHANGE ORDER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60964014576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

TIMOTHY S NEELY

Mailing Address 9 MAJESTIC COURT

City

COLUMBIA

State

SC

Zip Code

29223-7763

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medicare Palmetto GBA

Occupation

MGR, GOVT AUDIT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60966024576

Amount of Each Receipt this Period

20.00

P/R Deduction (\$10.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

JEAN F CATALANO

Mailing Address 361 HAY HILL CT

City

ELGIN

State

SC

Zip Code

29045-8240

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medicare Palmetto GBA

Occupation
AVP, CBIC

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60980864576

Amount of Each Receipt this Period

60.00

P/R Deduction (\$30.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

JOSEPH WRIGHT

Mailing Address 535 OLD CHEROKEE ROAD

City

LEXINGTON

State

SC

Zip Code

29072-9038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medicare Palmetto GBA

Occupation
VP&CFO MEDCARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60981824576

Amount of Each Receipt this Period

39.00

P/R Deduction (\$19.50 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

MICHAEL N BURKHEAD

Mailing Address 636 WINTER WREN LANE

City

BLYTHEWOOD

State

SC

Zip Code

29016-7189

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medicare Palmetto GBA

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60981894576

Amount of Each Receipt this Period

50.00

P/R Deduction (\$25.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

149.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

HARRY E GREENLEAF

Mailing Address 104 WILDEWOOD CLUB CT

City

COLUMBIA

State

SC

Zip Code

29223-3135

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medicare Palmetto GBA

Occupation

DIR, CS & PROV ED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60984114576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

SCOTT J MANNING

Mailing Address 6500 WILDWOOD DRIVE

City

MCKINNEY

State

TX

Zip Code

75070-5011

FEC ID number of contributing
federal political committee.

C

Name of Employer
TrailBlazer

Occupation

VP, TRAILBLAZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60985494576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

GEORGE K BIDWELL

Mailing Address 2505 BIG HORN LANE

City

RICHARDSON

State

TX

Zip Code

75080-2103

FEC ID number of contributing
federal political committee.

C

Name of Employer
TrailBlazer

Occupation

VP&COMPL OF,GVT SUB

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60989064576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

KENNETH K KERNS

Mailing Address 3 DILTON COURT

City

RICHMOND

State

VA

Zip Code

23238-5420

FEC ID number of contributing
federal political committee.

C

Name of Employer
TrailBlazer

Occupation

VP, TRAILBLAZER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60993144576

Amount of Each Receipt this Period

64.00

P/R Deduction (\$32.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

JAMES E DOTSON

Mailing Address 328 FARMHOUSE LOOP

City

LEXINGTON

State

SC

Zip Code

29072-2786

FEC ID number of contributing
federal political committee.

C

Name of Employer
CDS

Occupation

CFO, CMP DATA SVCS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60994624576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

C.

Full Name (Last, First, Middle Initial)

STEVE C BARLOW

Mailing Address P O BOX 835013

City

RICHARDSON

State

TX

Zip Code

75083-5013

FEC ID number of contributing
federal political committee.

C

Name of Employer
CDS

Occupation

AVP, I/S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR60996014576

Amount of Each Receipt this Period

40.00

P/R Deduction (\$20.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

144.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 45

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

DAVID BOUCHER

Mailing Address 2132 BEE RIDGE ROAD

City

COLUMBIA

State

SC

Zip Code

29223-6705

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

PRES/COO,COMP GLOB

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR61000674576

Amount of Each Receipt this Period

30.00

P/R Deduction (\$15.00 Bi-Weekly)

B.

Full Name (Last, First, Middle Initial)

WESLEY S GRAVES

Mailing Address 910 SARDIS COURT

City

BLYTHEWOOD

State

SC

Zip Code

29016-9584

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Cross Blue Shield of
S.C.

Occupation

DIR, OPS STRAT&DEV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 1 0

Transaction ID: PR61001504576

Amount of Each Receipt this Period

56.00

P/R Deduction (\$28.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)

86.00

TOTAL This Period (last page this line number only)

4538.16

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of South Carolina Federal Government Programs

A.

Full Name (Last, First, Middle Initial)

John Spratt for Congress

Mailing Address PO Box 109806

City
Rock Hill

State
SC

Zip Code
29731

Purpose of Disbursement
Void - John Spratt for Congress

Candidate Name
John Spratt

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: SC District: 05

Transaction ID: 9651710

Date of Disbursement

11 / 23 / 2010

Amount of Each Disbursement this Period

-2000.00

Void - John Spratt for Co-
ngress

SUBTOTAL of Disbursements This Page (optional)

-2000.00

TOTAL This Period (last page this line number only)

-2000.00